

OCTOBER 1998

IMPORT HEALTH REQUIREMENTS OF NORWAY FOR CATS EXPORTED FROM THE UNITED STATES

Each cat presented for importation to Norway from the United States must be accompanied by an original **Veterinary Certificate**. The **Veterinary Certificate** consists of two parts, the **Health Certificate** and the **Vaccination Certificate**.

Health Certificate

No more than 10 days prior to importation, the **Health Certificate** must be signed by the owner/importer and by an accredited veterinarian and be signed and endorsed by an APHIS veterinarian. The accredited veterinarian must attest that the cat listed on the certificate:

1. Is identifiable by a legible tattoo or readable microchip.
2. Does not show clinical signs of contagious disease.
3. Has been treated for *Echinococcus multilocularis* tapeworm.

Vaccination Certificate

The **Vaccination Certificate** must be completed and signed by an accredited veterinarian as well as signed and endorsed by an APHIS veterinarian. It must address the following diseases:

1. **Feline panleukopenia.** The cat must have been vaccinated against feline panleukopenia at some point.
2. **Rabies.** The cat must not have been vaccinated against rabies within the 30 days (24 months if a live rabies vaccine is involved) prior to importation.

If the cat is to be positively identified by implanted microchip rather than by tattoo, and the microchip is other than of the FECAVA (Federation of European Companion Animal Veterinary Associations) standard or the ISO (International Organization for Standardization) standard, the owner/importer must provide a compatible reader.

Upon arrival in Norway, the cat must complete a quarantine of at least 4 months and afterward must be isolated at home for another 2 months. **The cat must be registered and have a place secured for quarantine at least 30 days prior to importation. Please contact the: Norwegian Veterinary Authority, District Veterinary Officer for Mysen and Spydeberg, P.O. Box 228, N-1851 Mysen, Norway; Phone: 47 69 89 36 10; Fax: 47 69 89 24 80.**

VETERINARY CERTIFICATE FOR IMPORT OF DOG/CAT TO NORWAY FROM RABIES INFECTED COUNTRIES OTHER THAN EU/EFTA COUNTRIES

Owner/Importer: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____ Country: _____

Animal species (check one): _____cat _____dog

Breed: _____ Date of Birth: _____

ID number (microchip or tattoo): _____

I, the undersigned owner/importer (note which), declare that the dog/cat is at least 6 months old and is not pregnant.

_____	_____	_____
<i>Owner/Importer</i>	<i>Date</i>	<i>Signature</i>

_____	_____	_____
<i>Accredited Veterinarian</i>	<i>Place and Date</i>	<i>Signature</i>

_____	_____	_____
<i>APHIS Veterinarian</i>	<i>Place and Date</i>	<i>Signature and Stamp</i>

Part I. Health Certificate (Valid for 10 days; not to be used for Norwegian service dogs)

I, the undersigned accredited veterinarian, have today examined and treated the animal and confirm that:

1. The animal is identified by a decipherable tattoo or microchip which corresponds with the identification given on all documents presented to me.
2. The animal does not show clinical signs of contagious disease. The owner has assured me that the animal during the last 30 days has not been in contact with other animals that may be suspected of transferring infectious disease.
3. The animal has been treated for *Echinococcus multilocularis* with an approved preparation (praziquantel). The owner has assured me that the animal is intended for export to Norway within a maximum of 10 days.

_____ <i>Accredited Veterinarian</i>	_____ <i>Place and Date</i>	_____ <i>Signature</i>
_____ <i>APHIS Veterinarian</i>	_____ <i>Place and Date</i>	_____ <i>Signature and Stamp</i>

Border Control. (To be completed by Norwegian officials; the importer must give 48 hours notice to the District Veterinary Officer responsible for the border control post regarding the time and place of arrival.)

_____ <i>District Veterinary Officer</i>	_____ <i>Place and Date</i>	_____ <i>Signature and Stamp</i>
_____ <i>Customs Authority</i>	_____ <i>Place and Date</i>	_____ <i>Signature and Stamp</i>

Release from Quarantine. (To be completed by the District Veterinary Officer for Mysen and Spydeberg)

_____ <i>Dist. Vet. Officer - Mysen and Spydeberg</i>	_____ <i>Place and Date</i>	_____ <i>Signature and Stamp</i>
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Release from Home Isolation. (To be completed by the Veterinary Officer of the applicable District)

_____ <i>District Veterinary Officer</i>	_____ <i>Place and Date</i>	_____ <i>Signature and Stamp</i>
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Treatment for *Echinococcus multilocularis* has been repeated after arrival in Norway.

_____ <i>Authorized veterinarian</i>	_____ <i>Place and Date</i>	_____ <i>Signature and Stamp</i>
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Part II. Vaccination Certificate (In the case of dogs, valid until 365 days after the last leptospirosis vaccination, 730 days after the last canine distemper vaccination, or 21 days after the last blood sampling for leptospirosis and brucellosis.)

1. Leptospirosis. (Dogs only; mark the correct alternative)

A. _____ The dog has been vaccinated against leptospirosis (*L. canicola* and *L. icterohaemorrhagiae*) with an approved vaccine in a period of 365 to 30 days prior to import)

OR

B. _____ The dog has been revaccinated against leptospirosis (*L. canicola* and *L. icterohaemorrhagiae*) with an approved vaccine in a period of 365 days prior to import.

Date of Vaccination or Revaccination

Name of Vaccine

OR

C. _____ During the last 21 days prior to departure, blood samples were taken from the dog and sent to a competent veterinary laboratory, where they were submitted to a serological test (microscopic agglutination) for leptospirosis. The result of the test showed less than 50% agglutination at a dilution of 1:30 for an unvaccinated dog, or less than 50% agglutination at a dilution of 1:300 for a dog vaccinated against leptospirosis.

Date of Blood Sampling

Name of Laboratory

2. Canine distemper. (Dogs only; mark the correct alternative)

A. _____ The dog has been vaccinated against canine distemper with an approved vaccine in a period of 730 to 30 days prior to import.

OR

B. _____ The dog has been revaccinated against canine distemper with an approved vaccine in a period of 730 days prior to import.

Date of Vaccination or Revaccination

Name of Vaccine

3. Brucellosis. (Dogs only) The dog has been tested serologically for brucellosis (*Brucella canis*) with a negative result. The blood sample was drawn within 21 days prior to importation.

Date of Blood Sampling

Name of Laboratory

Health Certificate No. _____
(Valid only if the USDA Veterinary
Seal Appears Over the Certificate #)

4. Parvovirus, infectious tracheobronchitis, and feline panleukopenia. The dog has been vaccinated against canine parvovirus and infectious tracheobronchitis (kennel cough) or the cat has been vaccinated against feline panleukopenia prior to import.

Date of Vaccination

Name of Vaccine

5. Rabies. The dog/cat has not been vaccinated against rabies during the last 30 days.

Name of Accredited Veterinarian

Place and Date

Signature

Valid Until (Date)

Name of APHIS Veterinarian

Place and Date

Signature and Stamp